

Docket No. 0575/64080/JPW/AJM/JCS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): David M. Stern, et al.
 Serial No. : 09/872,185 Examiner: J. Seharaseyon
 Filed : June 1, 2001 Group Art Unit: 1647
 For : Methods for Treating Inflammation

Mail Stop RCE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Date: November 21, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

_____ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

_____ A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	11 -	* 25 =	*** 0 X	\$25	\$50	=		0
Indepen- -dent Claims	1 -	** 3 =	*** 0 X	\$100	\$200	=		0
Multiple Dependent Claim(s) Presented For First Time ____ Yes <u>X</u> No				\$180	\$360	=		0
				TOTAL ADDITIONAL FEE			\$ 0.00	

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.
 * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
 ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
 *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

Applicant(s): David M. Stern, et al.

Serial No. : 09/872,185

Filed : June 1, 2006

Amendment Transmittal Letter

Page 2

The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter

☒ Return Receipt Postcard

☒ An Information Disclosure Statement, including Form PTO-1449

(Copies of citations included: Yes ☒ No ☐

and a fee of \$ _____ included)

☐ A Petition for an Extension of Time, including a fee of \$ _____ for a Petition for _____ Month(s) Extension of Time

☒ Other (identify): Request for Continued Examination

THE TOTAL FEE DUE IS \$ 790.00.

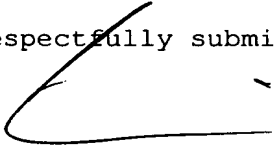
☒ A check in the amount of \$ 790.00 is enclosed.

☐ Please charge Deposit Account No. _____ in the amount of \$ _____.

☒ The Commissioner is hereby authorized to charge any additional fees required or credit any overpayment to Deposit Account No. 03-3125 as follows:

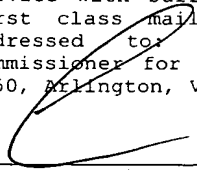
☒ Fees under 37 C.F.R. \$1.16 for the presentation of extra claims
☐ Patent application processing fees under 37 C.F.R. \$1.17

Respectfully submitted,



John P. White
Registration No. 28,678
Alan J. Morrison
Registration No. 37,399
Attorneys for Applicant(s)
Cooper & Dunham LLP (Customer #23432)
1185 Avenue of the Americas
New York, New York 10036
(212) 278-0400

I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450



Alan J. Morrison
Reg. No. 37,399

11/21/06
Date